



OREGON

Preventing Cancer Through Community Empowerment

Colorectal cancer (CRC) is the second most deadly cancer that affects both men and women, but it does not have to be. Screening can prevent CRC or catch it early when it is highly treatable. But too few men and women in Oregon have been screened.

The Oregon Partnership for Cancer Control (OPCC) started a new campaign to increase screening rates for CRC to 80% among people aged 50–75 years by 2014. In Oregon, CRC screening rates during 2006–2009 were 44.1%.

OPCC selected Clatsop County for a pilot study because the CRC death rate is significantly higher there than in the rest of the state (23/100,000 in Clatsop County versus 18/100,000 in Oregon overall). Six recognizable spokespeople from across Clatsop County who had been screened for CRC agreed to have their stories published in print, in campaign materials, on a Web site (<http://www.TheCancerYouCanPrevent.org>), and in radio ads. Their stories focused on the ease and importance of being screened and why people should get screened.

“Getting screened for colorectal cancer was a no-brainer. It was easy. The difficult part was the prep, and that wasn’t even that bad. Honestly, it was a piece of cake: go in, go to sleep, and then go home. I plan to get screened again when it’s time and encourage people in my life to do the same.”

—Bill Lind, Oregon resident

CONTACT

Oregon Comprehensive Cancer Control Program

800 Northeast Oregon Street
Suite 730
Portland, OR 97232

971- 673-1121

<http://public.health.oregon.gov/DiseasesConditions/ChronicDisease/Cancer/Pages/index.aspx>

The pilot study confirmed earlier findings that an effective method of increasing CRC screening rates is to have people who have been screened talk about their experience with their peers and encourage them to get screened as well.

The media campaign included the two hospitals in Clatsop County; large employers; local institutions; associations such as the Chamber of Commerce, Rotary Club, and Kiwanis Club; insurance providers; county school districts; the Clatsop County Housing Authority; and the community college. Overall, 22 local organizations distributed materials to more than 24,000 local residents.

In a post-pilot telephone survey, 91 of 196 people recalled seeing or hearing campaign ads, news stories, and materials. People who had been screened were more likely to recall the campaign, which is a key finding given that the primary audience is Oregonians who have been screened.

Nearly 80% of respondents who recalled the campaign said they agreed or strongly agreed that the campaign made them more likely to recommend CRC screening. During the 3-month pilot period, Dr. Truman Sasaki, the campaign's provider champion, performed 71 more colonoscopies than during the same period the year before, totaling 220 colonoscopies, including 20 who requested screening because of the campaign or because someone they knew encouraged them to get screened. Dr. Sasaki found and removed polyps—some pre-cancerous—from nearly half of the patients, possibly preventing cancer and needless death. Dr. Sasaki found cancer in one patient, enabling the patient to begin treatment immediately.

Local businesses, media, clubs, and other institutions proved willing to give resources and attention to this important topic at reduced or no cost. As a consequence, the resiliency, well-being, and vibrancy of the community were strengthened.

"When my grandmother died of colorectal cancer back when I was a child, there wasn't really the option to get screened and prevent the cancer altogether.

So, now that we have that option, why wouldn't everyone get screened? Some friends and coworkers tell me they're nervous. I was too. But, I say with all confidence that it's really not that bad."

*— Gretchen Darnell,
Oregon resident*

